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\*\* CONTINUING DATA ..... *None IDH*

\*\* FOREIGN APPLICATIONS ..... *yes IDH*  
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## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>DH</i>				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

## ADDRESS

026304

## TITLE

Data transmission method and transmission apparatus using the same

<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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